



Rutgers University
Student Activities
Business Office

Ticket Sale Request Form

The following form **must** be completed and submitted to SABO two weeks prior to the event in order for tickets to be sold. Tickets must also be numbered.

Event Information:

1. Organization Name: _____
2. SABO Acct. #: _____
3. Event Name: _____
4. Event Date & Location: _____
5. Event Description: _____

Ticket Information:

1. Ticket Sale Start Date: _____
2. Cost for Student: \$ _____
3. Cost for Non-Student: _____
4. Number of ID's Per Student: _____
5. Number of Student Tickets Per ID _____ , number of guest tickets per ID _____
6. Forms of Payment Accepted: Cash []; KE []; Check []; CC (3.5% fee) []
7. Waiver Required? Yes [] No []
8. Deposit to Acct. # _____ Line Code _____
9. Alternative Sale Locations (*if applicable) _____

Contact Information:

1. Name of Contact Person: _____
2. Contact Phone Number: _____ Email: _____
3. Alternative Contact Person: _____ Phone Number: _____

Administrative Advisor:

1. Name: _____
2. Signature: _____